

**SUMMARY OF THE
ACCREDITATION PROCESS COMMITTEE MEETING
JUNE 29, 1999**

The Accreditation Process Committee of the National Environmental Laboratory Accreditation Conference (NELAC) met on Tuesday, June 29, 1999, at 1 p.m. Eastern Daylight Time (EDT) as part of the Fifth NELAC Annual Meeting in Saratoga Springs, NY. The meeting was led by its chair, Ms. Margaret M. Prevost of the New York State Department of Health. A list of action items is given in Attachment A. A list of participants is given in Attachment B. *The purpose of the meeting was to discuss agenda items set forth by the committee chair.*

INTRODUCTION

Ms. Prevost, the committee chairperson, began with an introduction of each of the committee members. The meeting facilitator explained session ground rules.

PROPOSED CHANGES TO CHAPTER 4

Section 4.1.1 - Grandfather Clause For Technical Director

Ms. Prevost began the meeting by outlining several of the proposed changes in the Chapter 4 Standards. The first change was in Section 4.1.1. The following sentence was changed to read as follows: "Persons who do not meet the education credential requirements of 4.1.1.1 of the NELAC Standards and are the technical director(s) on the date that the laboratory becomes subject to these NELAC Standards shall qualify as technical director(s) of that laboratory or any other NELAC-accredited laboratory performing the same fields of testing....".

Some discussion ensued and it was suggested that the wording should be made even more specific concerning the grandfathering clause.

Section 1.9.1

The committee only recently learned that Section 1.9.1 from the 1997 NELAC Standards had been removed from Chapter 1 and was to have been moved to Chapter 4. The section will be added and presented for a vote on Thursday.

Section 4.1.9 "Certification of Compliance" Statement

The text was modified to read: "The applicant understands and acknowledges that the laboratory is required to be continually in compliance with the standards of the (insert the name of the primary accrediting authority) under its status as a NELAC Accrediting Authority...".

Discussion ensued on interpretation that laboratories will only be required to follow rules set forth in the NELAC Standards. Ms. Prevost responded that the committee felt that there should be language in the standards stating that the laboratory will meet guidelines set forth by the accrediting body. The laboratory is required to meet NELAC Standards as well as those required

by the individual State. The laboratory cannot refuse to follow supplemental guidelines set forth by the State that are more stringent than those of NELAC. It was noted that pursuant to Chapter 1, supplemental requirements can only relate to analyte and method. It was suggested that these questions should be referred to the USEPA or State General Counsel. The committee suggested that this topic be placed in the parking lot and continue with the agenda.

Section 4.1.2 - On-site Assessments

Several minor wording changes were accepted by the committee for consideration.

1) 4.1.2 (b) remove the word “permanently” in the two instances where mobile laboratory configuration is discussed.

2) 4.1.2 (c) the first sentence was changed to read “An auxiliary mobile laboratory is owned, leased or operated.....” Additional wording was suggested from the floor. It was suggested that the following sentence be added as the third sentence and would replace the text following Chapter 5 in sentence 2 “Total time of operation for all auxiliary mobile laboratories associated with a fixed based laboratory shall not exceed more than 90 calender days per year.” Ms. Prevost said that the intention of the committee was that each auxiliary mobile laboratory be allowed to operate for a maximum of 90 days per year. Ms. Maude Bullock will compose clarifying language for 4.1.2(a) and submit it to the committee.

Section 4.1.2 - Mobile Laboratories

Ms. Prevost stated that Environmental Laboratory Advisory Board (ELAB) has suggested that the committee should not further address the mobile laboratory issue until the Field Measurements *ad hoc* Committee has done more work on the issue. The committee felt that this issue must be addressed as soon as possible because several of the accrediting bodies already certify mobile laboratories. The Accreditation Process Committee and the Field Measurements *ad hoc* Committee will work together during the coming year to address the mobile laboratory issue. Several issues were brought up by participants from the floor that could not be clarified until the Accreditation Process and Field Measurements *ad hoc* Committees are able to address them. These issues were 1) would air monitoring stations be considered mobile laboratories and 2) would persons with accredited equipment that can be carried in a box/briefcase from site-to-site be considered a mobile laboratory? The committee explained that this is currently not an issue because ambient air and source measurements are not currently covered by standards. Dr. Bart Simmons, chair of the Field Measurements *ad hoc* Committee stated that his committee had no problem with the definitions of mobile laboratory and auxiliary mobile laboratory as they appeared in Chapter 4.

It was requested that the committees responsible for Chapters 4 and 6 verify that they agree on the definitions of mobile laboratories. There was continued discussion on interpretation of the standards concerning mobile laboratories. Dr. Simmons explained that they have discussed the mobile laboratory issue. It is the view of the Field Measurements *ad hoc* Committee that the quality system of each laboratory is what NELAC is concerned with, whether it be a fixed or a mobile laboratory. The committee responded that they would work with the Accrediting

Authority Committee to make sure the definitions of mobile laboratories are consistent between the two chapters.

Clarification was requested concerning whether qualitative testing would require one to meet standards. The committee explained that qualitative issues do not require accreditation at this point because it falls under the category of field testing.

Additional questions concerning mobile laboratories included how many mobile laboratories could be placed under one certification, and how does this differ from laboratories that are spread out, for example, over several hundred acres? The response was that mobile laboratories differ because they may be hundreds of miles from the parent laboratory resulting in less oversight and supervision.

OTHER ISSUES

The suggestion was made that Chapter 4 be restructured as follows:

- 4.1 Components of Accreditation
- 4.2 Application
- 4.3 Interim Accreditation
- 4.4 Awarding of Accreditation
- 4.5 Maintaining Accreditation
- 4.6 Denial, Suspension, and Revocation of Accreditation
- 4.7 Enforcement

It was suggested that either “Failure to comply with standards” or “Failure to have a Quality System” be added as the 10th criteria for denial or accreditation in Section 4.4.1. The same participant further added that he felt the wording in Sections 4.4.1 and 4.4.3 was inconsistent and should be made more consistent. The committee stated that they would continue to work together on this issue but would not be able to present these changes to be voted on during NELAC V.

It was suggested that in Section 4.4.3 b the wording only spells out that the laboratory must have a director during the initial accreditation. It does not allow the laboratory to revoke accreditation because the laboratory does not have a technical director at a later date. It was suggested from the floor that there should be a review of all chapters to make sure they are consistent from chapter to chapter. Another suggestion from the floor was to add additional wording in reasons for revocation and denial. Section 4.4 should read “shall include but not be limited to the following reasons.” However, from a legal standpoint the language may need to be more explicit.

It was suggested that several items from Chapter 6, Sections 6.8, 6.2.1, and 6.2.2 should be moved to Chapter 4. It was also suggested that the committee should review issues on the National Database but it was decided that this might best be handled by the Accrediting Authority.

A participant requested that ELAB be approached to suggest a new inter- and intra-chapter review of the standards be conducted to clean up inconsistencies. Ms. Sylvia Labie said she would consult with the Board of Directors on the issue.

ADJOURNMENT

The chair adjourned the meeting at 4:45 p.m. Committee members whose terms expire in 1999 (Ms. Prevost and Mr. Peter Spath) were thanked for their service to NELAC and the committee.

ACTION ITEMS
ACCREDITATION PROCESS COMMITTEE MEETING
JUNE 29, 1999

Item No.	Action	Date to be Completed
1.	Committee will review Chapter 4 to identify inter-chapter and intra-chapter inconsistencies.	4/1/00
2.	Consult with Field Measurements <i>ad hoc</i> Committee to reach agreement or definition of mobile laboratory.	10/15/99
3.	Ms. Bullock to compose clarifying language for Section 4.1.2(a) for submittal to the committee.	

**PARTICIPANTS
ACCREDITATION PROCESS COMMITTEE MEETING
JUNE 29, 1999**

Name	Affiliation	Address
Prevost, Margaret Chair	NY State Dept. of Health - ELAP	T: (518) 485 - 5570 F: (518) 485 - 5568 E: mmp03@health.state.ny.us
Baumgart, Mary Ann	MN Valley Testing Laboratories	T: (507) 354 - 8517 F: (507) 359 - 2890 E: quamvfl.newulmtel.net
Cruse, Janet (absent)	IL EPA, Division of Laboratories	T: (217) 785 - 0601 F: (217) 524 - 0944 E: epa.6111@epa.state.il.us
English, Zonetta	Louisville & Jefferson Co Metro Sewer Dist	T: (502) 540 - 6706 F: (502) 540 - 6779 E:
Griggs, John	USEPA, Region 4, Office of Air & Radiation	T: (334) 270 - 3450 F: (334) 270 - 3454 E: griggs.john@epamail.epa.gov
Hill, David	O'Brien and Gere Laboratories Inc.	T: (315) 437 - 0200 F: (315) 463 - 7554 E: hilldr@obj.com
Macelletti, Nicholas	CT Dept Public Health	T: (860) 509 - 7386 F: (860) 509 - 7295 E: mace101w@wonder.em.cdc.gov
Pulano, Robert	General Engineering Laboratories	T: (843) 556 - 8171 F: (893) 766 - 1178 E: rlp@gel.com
Spath, Peter	Eastman Kodak Company	T: (716) 588 - 0801 F: (716) 722 - 4406 E: pspath@kodak.com
Wheatley, Gleason	KY Dept. Environmental Protection	T: (502) 564 - 6120 F: (502) 564 - 8930 E: wheatley@nrdep.nr.state.ky.us
Eaton, Cary (Contractor Support)	Research Triangle Institute	T: (919) 541-6720 F: (919) 541-7215 E: wce@rti.org
Ennis, Todd (Contractor Support)	Research Triangle Institute	T: (919)541-7226 F: (919)541-7386 E: jte@rti.org
Leinbach, Adrienne (Contractor Support)	Research Triangle Institute	T: (919) 541-7196 F: (919) 541-7386 E: aal@rti.org